U S Department of Labor Office of Labor-Management Standards Washington DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257 as amended Fallure to comply may result in criminal prosecution fines, or civil penalties as provided by 29 U.S C 439 or 440

For Official Use Only			
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT			
E 600 a			
S Rec'd Pr			
1 File Number u AU622765	2. Fiscal Year Covered From:		
10/34	1 / 1 / 2004 Through 12 / 31 / 2004		
3. Name and address of person filing	4 Name, file number and address of labor organization		
Name James Reid	Name International Union of Painters & Allied Trade		
	Labor Organization File Number 000-035		
PO Box Bldg Room No if any	PO Box Building and Room Number If any		
Street 1750 New York Avenue N W	Street 1750 New York Avenue N W		
City Washington	City washington		
State District of Columbia ZIP Code+4 20006-5301	State District of Columbia ZIP Code+4 20006-5301		
5 Position in labor organization General President s Representative			
Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)			
A Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent			
8 Name and address of Employer (Including trade name if any).	7 a Nature of Interest, Transaction, or Income		
Name			
Trade Name If any			
PO Box Bldg Room No if any			
Street	7.b Amount		
Street			
City			
State ZIP Code + 4			
Signature			
15. Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contested in any accompanying documents), has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct and complete (See the section on penalties in the instructions.)			
Signed James Ll	On 8/14/05 202 637-0700 Date Telephone Number		
·			

Name of Person Filling James Reid		File Number U	
B Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from selling or leasing to or other of an employer whose employees your labor organization represents or is actively any part of which consists of buying from or selling or leasing directly or indealing with your labor organization or with a trust in which your labor organization.	wise dealing with the busines: vely seeking to represent, or firectly to or otherwise	s	
8 Name and address of Business (Including trade name if any) Name IUPAT Labor Management Cooperation Initiativ Trade Name if any: P O Box Bidg Room No if any Street 1750 New York Avenue N W City Washington State District of Columbia ZIP Code + 4 20006 10 If 9 b or 9.c. is checked give trust or employer's name Name Trade Name if any:	9 Business deals with X a Labor Organiza b Trust c Employer 11 a Nature of such deals Affiliated labor mof shared costs		
P O Box Bidg Room No if any Street City State ZIP Code + 4	11 b Approximate dollar value 12 a Nature of interest hele 8/18/04 meal 92	d or income received	
	12 b Amount	\$92	
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value			
13 a Name and address of Employer or Labor Relations Consultant (including trade name, if any) Name Trade Name if any: P O Box Bidg Room No if any Street City ;	14.a Nature of payment		
State ZIP Code + 4	14 b Amount of payment.		
12 h le the Surrence on Employer Co. or Consultant C. 2	14 b Amount of payment.		

The transactions, dealings and interests that are detailed in the attached Form LM-30 represent my good faith effort to reconstruct the reportable occurrences for the period of January 1, 2004 to December 31, 2004 Accurate records of reportable occurrences were not kept for the 2004 fiscal year, and some or many items may have been unintentionally omitted. If, in the future, it comes to my attention that there exists a transaction, dealing, or interest that should have been reported for the period of January-1, 2004-to December 31, 2004, I will file an amended Form LM-30